



Foodservice Establishment Inspection Report

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| Establishment Information | | | | | |
| Facility Name SUBWAY OF SAINT GERMAIN | | | Facility Type Restaurant | | |
| Facility ID # HSAT-7QX4GD | | | Facility Telephone # 715 542-2404 | | |
| Facility Address 510 STATE HWY 155 SAINT GERMAIN , WI 54558 | | | | | |
| Licensee Name H&P OF WAUPACA INC | | | Licensee Address PO BOX 776 SAINT GERMAIN , WI 54558 | | |

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|-----------------------------------|--------------------------------------|------------------|
| Inspection Information | | |
| Inspection Type Routine | Inspection Date 05/06/2015 | Total Time Spent |

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|-------------------------------|--------------------------|
| Equipment Temperatures | |
| Description | Temperature (Fahrenheit) |
| Walk-In Cooler | 40 |
| Coke Cooler | 40.5 |
| Line Cooler | 38 |

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|--------------------------|--------------------------|
| Food Temperatures | |
| Description | Temperature (Fahrenheit) |
| Hot holding meatballs | 163 |
| Cold holding egg salad | 41 |
| Cold holding tomatoes | 41.5 |

| | | | | | |
|-------------------------------|---------------------------------|--------------|-----|----------------|----------------|
| Warewashing Info | | | | | |
| Machine Name | Sanitization Method | Thermo Label | PPM | Sanitizer Name | Sanitizer Type |
| Four Compartment Manual | Low Temperature Sanitizer | | 300 | Super San | Quat |

| | | |
|-----------------------------|-------------------------------------|---|
| Certified Manager | | |
| Name MARY K HINES | Certificate # KBRN-8S5J82 | Certificate Expiration 02/06/2017 |

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Observed Violations**Total # 1****Good Retail Practices - 45 - Food and non-food contact surfaces cleanable, properly designed, constructed and used**

This is a core item

OBSERVATION: Sterilite container in walk in cooler with parmesan oregano in it is not ANSI certified or approved by the department.

CORRECTIVE ACTION(S): Unapproved equipment shall be removed from food service.

CODE CITATION: 4-205.11 (A) Except as specified under ¶ (B) of this section, FOOD EQUIPMENT that is certified or classified for sanitation by an American National Standards Institute (ANSI)-accredited certification program is deemed to comply with Parts 4-1 and 4-2 of this Chapter.

(B) FOOD EQUIPMENT that is not certified or classified for sanitation by an American National Standards Institute (ANSI)-accredited certification program shall be approved by both the department of health services and the department of agriculture, trade and consumer protection.

Comments

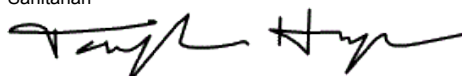
Ice machine was cleaned on 3/31/15 but still had some mold inside. Consider more thorough cleaning procedures.

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge



Sanitarian



TAYLOR HAYNES